

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: SonSeng Yeow, ChinLin Tan
Assignee: SEAGATE TECHNOLOGY LLC
Application No.: 10/692,516
Filed: 10/24/03
For: SYSTEM AND METHOD FOR INVENTORY REPLENISHMENT

CERTIFICATE OF EFS SUBMISSION (37 C.F.R. § 1.8(a)(i)(1)(C))

I hereby certify that on September 15, 2008 the following correspondence:

Name of Paper: RESPONSE TO OFFICE ACTION MAILED MAY 13, 2008

Number of Pages: 27

Fees: Fee for one month extension of time Amount: \$ 120.00 Payment By: Credit Card

Other: Transmittal (3 pages) and Interview Request Form (1 page)

is being submitted to the Patent and Trademark Office via the Office Electronic Filing System in accordance with § 1.6(a)(4) at _____ local time.



Signature

Reg. No.: 38,794 (if applicable)

Telephone Number: 877-654-6652

Mitchell K. McCarthy

Type or print name of person certifying

NOTE: It is advisable to keep a copy of certification of EFS-Web transmission § 1.8), including the list of papers submitted, to establish the local time of the submissions if such evidence is needed

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: SonSeng Yeow, ChinLin Tan
Assignee: SEAGATE TECHNOLOGY LLC
Application No.: 10/692,516 Group No.: 3687
Filed: 10/24/2003 Examiner: Hayles, Ashford
For: SYSTEM AND METHOD FOR INVENTORY REPLENISHMENT

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee: \$120.00

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)		OTHER THAN A SMALL ENTITY			
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE		ADDIT. FEE	
TOTAL	16	-	23	=	0	x	\$ 50.00	=	\$	0.00
INDEP.	2	-	5	=	0	x	\$ 210.00	=	\$	0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+	\$ 0.00	=	\$	0.00
TOTAL										
ADDIT. FEE									\$	0.00

No additional fee for claims is required.

FEE PAYMENT

5. Payment in the amount of \$120.00 to Credit card is being made electronically herewith.

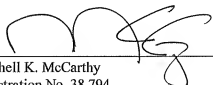
FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 50-4124.

If an additional fee for claims is required, charge Account No. 50-4124.

Date:

9/15/2008



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